

TASTE OF TROPICAL MEDICINE

Certificate Course on Tropical Medicine for Elective Students

4th – 8th March 2019

Application of Registration

Participants information

- Title: Prof / Dr / Other _____ . Mr / Mrs / Miss _____
- Full Name: _____
- Name with initials: _____
- Gender: M / F
- Postal Address: _____
- Country: _____
- Contact number: _____
- E.mail: _____
- Qualifications
- Bachelor Degree: _____
- Postgraduate degrees: _____
- Current position: _____
- Working Institute: _____
- Address of the institute: _____

Details of payments:

- Method of payment: Telegraphic Transfer
- Bank Account number: **057100183373667**
- Bank Name: People's Bank, Peradeniya, Sri Lanka
- Name of the account: Medical Faculty Research & Fund
- P/B Swift Code: **PSBKLKLX**
- Course fee: US\$ 500.00
- Refund policy: Non refundable
- Please attach a copy for the proof of payment

Links for Accommodation:

- <https://www.royalmallsrilanka.com>
- <http://www.hotelkandyanarts.com>
- <http://www.royalgroup.lk>

Enquiries:

Centre for Research in Tropical Medicine (CRTM), Faculty of Medicine, University of Peradeniya, Sri Lanka. Tel: +94 7 1273 0494 E. mail: crtmoffice@gmail.com

Web: <https://med.pdn.ac.lk/departments/CRTM/index.html>

Register for the course on or before **18th February 2019**.

Maximum number of participants: 20 offered as first come first serve.